

Enter the name of the county in which this case is filed.	STATE OF WISCONSIN, CIRCUIT COURT, <div style="border-bottom: 1px solid black; display: inline-block; width: 80%;"></div> COUNTY	<i>For Official Use</i>
Enter the name of the petitioner. If joint petitioners, enter the name of the wife.	In re the marriage of: Petitioner/Joint Petitioner-Wife: <div style="border-bottom: 1px solid black; display: inline-block; width: 100%;"></div> <div style="display: flex; justify-content: space-between; font-size: small;"> First name Middle name Last name </div> and	Marital Settlement Agreement With Minor Children <input type="checkbox"/> Divorce-40101 <input type="checkbox"/> Legal Separation-40201 Case No. _____
Enter the name of the respondent. If joint petitioners, enter the name of the husband.	Respondent/Joint Petitioner-Husband: <div style="border-bottom: 1px solid black; display: inline-block; width: 100%;"></div> <div style="display: flex; justify-content: space-between; font-size: small;"> First name Middle name Last name </div>	
Check divorce or legal separation.		
Enter the case number.		

Check 1 or 2.

 If 2, enter the reason you are asking for a legal separation and not a divorce.

We agree as follows:

A. MARITAL RELATIONSHIP

1. ☐ **Divorce:** This marriage is irretrievably broken.
2. ☐ **Legal Separation:** This marriage is broken and the reason we are requesting a legal separation and not a divorce is: _____

B. MAINTENANCE (Spousal Support)

1. **For the wife:**
 - a. ☐ The wife waives her right to receive maintenance. She understands that by waiving maintenance at this time, she may **never** request that a court award her maintenance from the husband named in this agreement.
 - b. ☐ The wife is not requesting maintenance at this time, but leaves open her right to request it in the future. Her right to request maintenance is limited to:
 1. ☐ any appropriate circumstance.
 2. ☐ the following circumstance(s) only: _____
 - c. ☐ The husband shall pay maintenance to the wife in the amount of \$ _____ per month beginning on the first day of the month of _____, 20_____. Maintenance shall end on the last day of the month of _____, 20_____, or until the wife remarries, dies, or by court order, whichever comes first.
2. **For the husband:**
 - a. ☐ The husband waives his right to receive maintenance. He understands that by waiving maintenance at this time, he may **never** request that a court award him maintenance from the wife named in this agreement.
 - b. ☐ The husband is not requesting maintenance at this time, but leaves open his right to request it in the future. His right to request maintenance is limited to:
 1. ☐ any appropriate circumstance.
 2. ☐ the following circumstance(s) only: _____
 - c. ☐ The wife shall pay maintenance to the husband in the amount of \$ _____ per month beginning on the first day of the month of _____, 20_____.

Check a, b, or c.

 If b, choose 1 or 2.

 If 2b, enter the reasons.

 If c, enter the maintenance amount and the month and year the payments should begin and end.

Check a, b, or c.

 If b, choose 1 or 2.
 If 2, enter the reasons.

 If c, enter the maintenance amount and the month and year the payments should begin and end.

FA-4150 Pro Se, 01/06 Marital Settlement Agreement With Minor Children
 This form shall not be modified. It may be supplemented with additional material.

§767.10, Wisconsin Statutes

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Maintenance shall end on the last day of the month of _____, 20_____, or until the husband remarries, dies, or by court order, whichever comes first.

Check a, b, or c.

If c, enter the payer's employer information.

Parties may not make payments directly to each other. (See WI Stat. 767.265)

3. Payments shall be made to the Wisconsin Support Collections Trust Fund (WI SCTF):

- a. ☐ No maintenance payments will be made.
b. ☐ Directly from the payer to WI SCTF (**only if self-employed**).
c. ☐ By income assignment from the payer's employer as indicated below:

Employer name: _____

Address of payroll office: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

4. Arrearages for Maintenance: The amount of the maintenance arrears owed to a party shall be determined by the court at the time of the final hearing and shall be paid and earn interest at the rate of _____% per year. Payment shall be made as follows:

- a. ☐ A one-time payment to the WI SCTF made by (date) _____.
b. ☐ Through monthly income withholding by the WI SCTF in the amount of \$_____ beginning on the first day of the month of _____, 20____ until the arrearages are paid in full.

Enter the rate of the interest and check a or b.

If a, enter the date by which the payment shall be made.

If b, enter the amount of the monthly payment and the month and year the payments shall begin.

C. MEDICAL INSURANCE

No later than the date of the final hearing, each party shall notify the other party in writing of the availability of COBRA or other continuation benefits under their current health care policy.

D. DEBTS AND LIABILITIES

Enter the date [month, day, year] on which each spouse is or was responsible for his/her own debts.

For each debt owed individually or jointly, write the name, current balance, and check who will be responsible for payment.

If more space is necessary, attach additional sheets.

1. Each party is individually responsible for any debts incurred by that person after (date)_____.

2. The following debts and liabilities shall be paid by the party indicated:

Creditor's Name	Balance	To be paid by wife	To be paid by husband
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>
_____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>

3. The parties agree and understand:

- Each party assigned a debt shall be fully responsible for that obligation and shall not make any demands upon the other party concerning that debt.
- Any debt not listed shall be the responsibility of the party who incurred it and that party shall not make any demands upon the other party concerning that debt.
- Creditors are NOT bound by this agreement and each party remains liable to creditors for all marital debts.
- Any party who suffers a loss because of a failure of the other party to pay an assigned debt may enforce that obligation by a motion for contempt of court.

E. PERSONAL PROPERTY DIVISION

The parties agree to the final personal property division as indicated below.

Complete the chart to the best of your ability.

Note: Using the chart at the right is strongly encouraged as it may avoid confusion or future problems.

List the property and check if the wife or husband will have temporary use of the property until the divorce/legal separation is final.	Who will have possession?	
	Wife = W	Husband = H
Household Items	W	H
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
Automobiles Year, Make, Model	W	H
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
Securities: Stocks, Bonds, Mutual Funds, Commodity Accounts Name of Company & # of shares	W	H
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
Cash and Deposit Accounts Name of Bank or Financial Institution	W	H
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
Other Personal Property Description of Asset	W	H
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>

Indicate when and how any exchange of property will take place.

Any exchange of property shall be made by (date) _____
according to the following arrangements: _____

Any property not listed above shall be awarded to the party who has possession at the time of the final hearing.

Check 1 or 2.

If 2, and the parties own a primary residence, check A.

If A, enter the address and Parcel Identification Number, which can be found on your real estate tax bill.

Attach a copy of the legal description.

Check 1 or 2.

If 1, check a or b.

If 2, check a, b, or c and enter how the repairs, etc. will be handled while the sale is pending.

Enter the percentage each party shall receive. The total amount must equal 100 %.

If the parties own other real estate (including any timeshare interests), check B, complete the attached Schedule A found at the end of this document.

F. REAL ESTATE

1. ☐ Neither party owns any real estate at this time.

2. ☐ One or both parties own real estate at this time.

A. ☐ **Primary Residence:** The parties own a primary residence located at:

Address: _____

City: _____ State _____ Zip _____

Parcel Identification Number (Tax Key Number): _____

Attached is a legal description of this property.

1. ☐ The primary residence shall be awarded to the:

a. ☐ Wife

b. ☐ Husband

and that party shall be responsible for outstanding financial obligations, and the other party shall be held harmless from any liability.

2. ☐ The residence shall be placed on the market for sale and the mortgage, taxes, and insurance will continue to be made by the:

a. ☐ Wife

b. ☐ Husband

c. ☐ Shared equally

until the closing date. Pending sale, parties agree to handle any necessary repairs, special assessments and other extraordinary circumstances as follows: _____

The money from the sale of this residence shall be used to pay the usual costs of a sale and prorations, and any balance on the existing mortgage. Upon payment of all costs, the proceeds left from the sale shall be divided between the parties as follows:

1. The wife to receive _____%.

2. The husband to receive _____%.

B. ☐ **Other Real Estate:** One or both of the parties own additional real estate, including any timeshare interests, which is disclosed and divided as set forth in the attached Schedule A.

Transfer of Title: Both parties understand that this marital settlement agreement alone will not transfer title to one party or the other, but such a transfer requires a fully executed **Quit Claim Deed** and a **Wisconsin Real Estate Transfer Return** signed by the parties. The party awarded a parcel of real estate shall be responsible for having the necessary documents prepared.

G. EQUALIZATION OF MARITAL PROPERTY DIVISION

1. ☐ No payment is required to be made to equalize the marital property division.

2. ☐ A payment of \$_____ is required to equalize the marital property division.

a. This payment shall be made by the:

1. ☐ Wife to the husband.

2. ☐ Husband to the wife.

b. This payment:

1. ☐ has already been made.

2. ☐ shall be made in a lump sum payment no later than (date) _____.

3. ☐ shall be paid in the amount of \$_____ per month beginning on the first day of the month of _____, 20 ____.

c. The amount shall earn interest until paid in full at the rate of _____% per year:

1. ☐ From the date of the final hearing.

2. ☐ From the date the payment was due.

Check 1 or 2.

If 2, enter the amount.

And, check a1 or a2.

And, check b1, b2, or b3. If b2, enter the date [month, day, year].

If b3, enter the amount of the monthly payment and the month and year the payments shall begin.

Enter the amount of interest (if any) in c and check c1 or c2.

H. TAXES

1. Year of Divorce/Legal Separation:

- The parties agree to file their income tax returns for the year of the divorce/legal separation consistent with the rules of the IRS, Wisconsin Department of Revenue, and Wisconsin's Marital Property law.
- The parties understand that their marital status on the last day of the year determines their filing status for that year, whether married or single.
- The parties acknowledge that each are responsible for seeking tax advice from a tax professional with regard to issues of this divorce/legal separation.

Check a or b.

If b, indicate how the parties agree to handle the filing (expense and refund, if any).

2. Years Before Divorce/Legal Separation:

- a. ☐ Tax returns for all previous years have been filed.
- b. ☐ The parties agree to file returns for the previous tax years as follows: _____

I. LEGAL NAME RESTORATION

Check 1, 2, or 3.

If 2 or 3, enter the former legal surname.

1. ☐ Neither party requests the use of a former legal surname.
2. ☐ The Wife requests the use of a former legal surname of: _____
3. ☐ The Husband requests the use of a former legal surname of: _____

Note: If this is an action for legal separation, the court cannot allow a spouse to resume a former legal surname unless and until the judgment is converted to a divorce.

J. LEGAL CUSTODY OF MINOR CHILDREN

1. The minor children (age 17 or younger) born to or adopted together by the parties, before or during the marriage, are listed below and the legal custody of each shall be as follows:

Enter the name, date of birth [month, day, year], social security number of each child, check custody option.

Name of child	Birth date	Soc. Sec. #	Joint Legal Custody	Sole legal custody to mother	Sole legal custody to father
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Other as follows: _____

2. In a sole legal custody arrangement, the parent not granted sole legal custody, shall file a medical history form with the court in compliance with sec. 767.24(7)(m) Wis. Stats.

K. PHYSICAL PLACEMENT OF MINOR CHILDREN

Note: Physical Placement means where the child lives or spends their time.

Shared placement occurs when a child spends at least 25% or 92 days per year with each parent. Otherwise one parent is considered to have primary placement.

Enter the names of the children. Check shared, primary mother or primary father for each child.

Check a or b. If a, attach a schedule. If b, describe how placement will be shared.

The physical placement of the minor children shall be as follows:

Name of minor child	Shared	Primary w/Mother	Primary w/Father
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

and the placement schedule shall be as follows:

a. ☐ As listed in the attached document.

b. ☐ As agreed here: _____

L. CHILD SUPPORT

Note: Child Support generally includes costs for food, shelter, clothing, transportation, personal care and incidental recreational costs.

For 1, check a, b, or c.

If a or b, enter the amount and the month and year the payment shall begin.

If c, enter the reason (reference WI Stats. 767.25(1m) for a listing of the factors by which a court can deviate from child support standards).

enter the appropriate guideline amount and check all that apply in 1-6.

If 6, enter the other reason it is unfair.

Note: For more information on DWD 40, contact your local Child Support Agency.

1. The parties agree that child support shall be paid as follows:

a. ☐ The husband shall pay child support to the wife in the amount of \$_____ per month, beginning on the first day of the month of _____, 20_____.

b. ☐ The wife shall pay child support to the husband in the amount of \$_____ per month, beginning on the first day of the month of _____, 20_____.

c. ☐ No child support shall be ordered from either party at this time because _____

2. The child support is based on the:

a. ☐ Chapter DWD 40 Child Support Percentage of Income Standard. (Based on Gross Income – 17% for one child, 25% for two children, 29% for three children, 31% for four children, 34% for five or more children)

b. ☐ This amount deviates from the DWD 40 Child Support Standard amount of \$_____ which would be unfair because child support should be calculated using the:

1. ☐ split-placement calculation
2. ☐ shared-placement calculation
3. ☐ serial-family payer calculation
4. ☐ low-income payer calculation
5. ☐ high-income payer calculation
6. ☐ other _____

3. Payments for child support shall be made to the Wisconsin Support Collections Trust Fund (WI SCTF):

a. ☐ **Directly from the payer to WI SCTF (only if self-employed)**

b. ☐ **By income assignment** from the payer's employer as indicated below:

Employer name: _____

Address of payroll Office: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

c. ☐ No child support is to be paid at this time.

For 3, check a, b or c. If b, enter the payer's employer information.

Check a or b.

If a, enter the date by which the payment shall be made.

If b, enter the amount of the monthly payment and the month and year the payments shall begin.

In 5, Note: Variable Costs are defined in DWD 40.03 (29). Variable cost orders are mandatory only for shared placement situations.

Enter the percentage each parent shall pay. The total amount must equal 100 %.

Enter the number of days for each deadline.

4. Arrearages for Child Support: The amount of the child support arrears owed to a party shall be determined by the court at the time of the final hearing and shall be paid and earn interest at the statutory interest rate. Payment shall be made as follows:

a. ☐ A one-time payment to the WI SCTF made by (date) _____.

b. ☐ Through monthly income withholding by the WI SCTF in the amount of \$ _____ beginning on the first day of the month of _____, 20 ____ until the arrearages are paid in full.

c. We understand this agreement has no effect on arrearages owed by either party to the state and that a court order may be entered for payment of those arrearages at the time of the final hearing.

5. Variable costs (required only in cases of a shared physical placement), which are those reasonable costs above basic support costs for a minor child, including but not limited to child care costs, tuition, a child's special needs, and other activities that involve substantial cost:

a. We agree to consult with each other before incurring any variable costs requiring reimbursement.

b. Shall be paid as follows (payments must be paid directly to the parent and cannot be made through WI SCTF):

1. The wife to pay ____% of the variable costs.

2. The husband to pay ____% of the variable costs.

c. The request for reimbursement for variable costs shall be made in writing within ____ days from the day the cost was incurred. Each party shall pay the required percentage within ____ days from the date of the request.

6. Deductions for Children as dependents and exemptions for income tax purposes:

Name of child	Mother to claim in all tax years	Father to claim in all tax years	Mother to claim in even tax years; Father to claim in odd tax years	Father to claim in even tax years; Mother to claim in odd tax years
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Enter the name of each child and then check the box to indicate how the deduction will be distributed.

7. Any party ordered to pay child support may only claim the minor children as exemptions for federal and state income tax purposes if he or she is current in payment of child support as of December 31 of the year in which he or she intends to claim the exemption, pursuant to DWD 40.03(10).

8. Each party agrees to cooperate in signing IRS Form 8332, or other appropriate state or federal tax forms, as necessary, in order to carry out the options selected above.

M. MEDICAL AND HEALTH CARE EXPENSES

Check a, b or c.

1. Medical Insurance: The parties agree that medical insurance coverage for the minor children including medical, dental, orthodontic, hospital, psychiatric, counseling, drug and other health expenses which is offered now or may be offered by a present or future employer shall be obtained and paid by:

- a. ☐ Both parties.
- b. ☐ The wife.
- c. ☐ The husband.

This person shall also provide the other parent with copies of policy information and insurance cards.

Enter the percentage each party shall pay. The total amount must equal 100%.

Enter the percentage that each parent will pay in a and b. The total must equal 100%.

Enter the number of days for the deadline.

2. Medical Insurance Payment: The difference in cost between single and family coverage shall be paid as follows:

- a. The wife to pay _____% of the difference to the husband.
- b. The husband to pay _____% of the difference to the wife.

3. Uninsured Health Care Expenses: Payments for health care expenses for the minor children not covered by insurance, including medical, dental, orthodontic, hospital, psychiatric, counseling, drug and other health expenses shall be paid as follows:

- a. The wife to pay _____% of the total amount.
- b. The husband to pay _____% of the total amount.

4. Reimbursements: Any request for reimbursement from the other party for medical insurance and uninsured health care expenses shall be made in writing. The other party shall pay their required percentage within _____ days after receiving a written request.

N. LIFE INSURANCE

Each party shall keep in full force and pay the premiums on all life insurance presently held upon his or her life, naming the minor children of the parties as sole primary beneficiaries in equal shares, until the youngest of the minor children reaches age of 18 or age 19 if they are pursuing a high school diploma or its equivalent. If current coverage is lost, the party with the current life insurance policies shall provide equivalent coverage. Each party agrees to furnish the other with proof of the named sole primary beneficiary upon request. This provision may be satisfied in a will or trust.

- a. ☐ The parties do not currently have any life insurance policies in force.
- b. ☐ The following life insurance policies are currently in full force:

Check a or b.

If b, enter the name of the company who holds the policy, the policy number, and the name of the party who the policy currently insures.

Company Name	Policy Number	Name of Insured
_____	_____	_____
_____	_____	_____
_____	_____	_____

Neither party may borrow against any life insurance policy after the date of this agreement, nor use it as collateral, without the written consent of the other party.

Check 1 or 2.

If 2, attach any additional agreements.

O. OTHER AGREEMENTS

We understand that any oral agreements are not enforceable by the court.

- 1. ☐ We have no other agreements, written or oral, concerning this marriage.
- 2. ☐ We have additional written agreements concerning this marriage, copies of which are attached.

P. AGREEMENTS and UNDERSTANDINGS

We understand and agree that:

- We could each get an attorney to review this agreement.
- This form was provided as a convenience and may NOT cover all issues.
- This agreement may have tax consequences and that seeking tax advice is suggested.
- We have fully disclosed each of our income, debts, assets and liabilities to each other.
- Maintenance is deductible by the payer and taxable to the payee.
- Child support is NOT deductible by the payer or taxable to the payee.
- The parents agree that this legal custody and physical placement arrangements are in the best interests of the minor children at this time.
- Any court order regarding child support, legal custody, or physical placement is not final and may be modified under an appropriate change of circumstances.
- If the court orders child support we must annually exchange financial information. A party who fails to furnish the information as required by the court under this subsection may be proceeded against for contempt of court under ch. 785 Wis. Stats.
- Any court order regarding the division of property is final as of the date of the final hearing and can never be changed.
- There are certain legal presumptions under Wisconsin law, such as:
 - Marital property should be divided 50/50.
 - Legal custody of minor children should be granted jointly to both parents.
 - A child born or conceived during the marriage is presumed to be the husband's child.

Q. VOLUNTARY EXECUTION / NATURE OF AGREEMENT

We assume equal responsibility for the entire content of this agreement. We have entered into this marital settlement agreement freely and voluntarily and not because of any undue influence. In some instances, the agreement represents a compromise of disputed issues. We believe the terms to be fair and reasonable under the circumstances.

We acknowledge that there may be substantial legal and tax implications with regard to this agreement. We understand that lack of knowledge of the law may not be sufficient to convince the court that relief from these provisions is required. We acknowledge that each of us has the right to seek the advice of our own personal attorney.

R. MUTUAL / GENERAL RELEASE

We release each other from any claim of any nature that may exist. Neither of us may, at any time hereafter, sue the other, or our heirs, personal representatives, and assigns, for the purpose of enforcing any or all of the rights relinquished and/or waived under this agreement. We agree that in the event any suit shall be commenced, this release, when pleaded, shall constitute a complete defense to any such claim or suit so instituted by the other party. We understand that this mutual and general release shall not become effective until this **Marital Settlement Agreement** is approved by the court.

S. FULL DISCLOSURE AND RELIANCE

We warrant to each other that there has been an accurate, complete, and current disclosure of all income, assets, debts, and liabilities. We understand and agree that deliberate failure to provide complete disclosure constitutes perjury under sec. 767.27 Wis. Stats. and a fraud upon the court. The property referred to in this agreement represents all the property in which either party has any interest. This agreement is based on our financial disclosure statements. We relied on these financial representations when entering into this agreement.

T. RESTRAINING ORDER

We agree to never interfere with the personal liberty of the other, or to go on the premises occupied by the other as a residence except with permission of that party.

U. EXECUTION OF DOCUMENTS

Now, or in the future, on demand, we agree to execute and deliver any and all documents that may be necessary to carry out the terms and conditions of this agreement.

V. DIVESTING OF PROPERTY RIGHTS

Except as otherwise provided for in this agreement, we give up all rights to the property awarded to the other.

All property awarded to a party shall be the separate property of that party.

We shall have the right to manage our separate property as if we had never been married.

W. SURVIVAL OF AGREEMENT AFTER JUDGMENT

We agree that the provisions of this agreement shall survive any subsequent judgment of divorce and shall have independent legal significance. This agreement is a legally binding contract, entered into for good and valuable consideration. It is contemplated that in the future either of us may enforce this agreement in this or any other court of competent jurisdiction.

X. JURISDICTION

This county shall have jurisdiction for all disputes unless otherwise agreed to in writing or as provided under Wisconsin Statutes.

Y. APPROVAL OF COURT REQUIRED

We have read this agreement and agree with its terms. We submit this **Marital Settlement Agreement** to the court for approval and request the court to incorporate its terms in the final judgment. Once approved by the court, we understand that either of us may enforce this agreement in this or any other court of competent jurisdiction.

Z. WAIVER OF APPEARANCE

We agree that the court may proceed with the final hearing without further notice, and consent to judgment being entered on the petition, pursuant to the terms of this **Marital Settlement Agreement** even if the respondent or one of the joint petitioners does not appear.

The wife must sign and print her name.

Enter the date on which she signed her name.

Note: This signature does not need to be notarized.

The husband must sign and print his name.

Enter the date on which he signed his name.

Note: This signature does not need to be notarized.

Signature

Print or Type Name

Date

Signature

Print or Type Name

Date

If either party is receiving public assistance or there is a case worker from the Child Support Agency assigned to your case, you must take this agreement to the Child Support Agency in your county for their approval.

If not, mark not required.

State of Wisconsin, Child Support Agency

- ☐ Approved
☐ Not Approved
☐ Not Required

Authorized Signature

Print or Type Name

Title

Date

If a Guardian ad Litem has been appointed to your case, you must take this agreement to the GAL for his/her approval.

If not, mark not required.

Guardian ad Litem

- ☐ Approved
☐ Not Approved
☐ Not Required (no GAL has been appointed)

Authorized Signature

Print or Type Name

Title

Date

SCHEDULE A – DIVISION OF OTHER REAL ESTATE

A. ☐ Parcel 2: The parties own other real estate located at:

Address: _____

City: _____ State _____ Zip _____

Parcel Identification Number (tax key Number): _____

Attached is a legal description of this property.

1. ☐ The real estate shall be awarded to the:

a. ☐ Wife

b. ☐ Husband

and that party shall be responsible for outstanding financial obligations, and the other party shall be held harmless from any liability.

2. ☐ The real estate shall be placed on the market for sale and the mortgage, taxes, and insurance will continue to be made by the:

a. ☐ Wife

b. ☐ Husband

c. ☐ Shared equally

until the closing date. Pending sale, parties agree to handle any necessary repairs, special assessments and other extraordinary circumstances as follows: _____

The money from the sale of this real estate shall be used to pay the usual costs of a sale and prorations, and any balance on the existing mortgage. Upon payment of all costs, the proceeds left from the sale shall be divided between the parties as follow:

1. The wife to receive _____ %.

2. The husband to receive _____ %.

B. ☐ Parcel 3: The parties own other real estate located at:

Address: _____

City: _____ State _____ Zip _____

Parcel Identification Number (tax key Number): _____

Attached is a legal description of this property.

1. ☐ The real estate shall be awarded to the:

a. ☐ Wife

b. ☐ Husband

and that party shall be responsible for outstanding financial obligations, and the other party shall be held harmless from any liability.

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a. ☐ Wife

b. ☐ Husband

c. ☐ Shared equally

until the closing date. Pending sale, parties agree to handle any necessary repairs, special assessments and other extraordinary circumstances as follows: _____

The money from the sale of this real estate shall be used to pay the usual costs of a sale and prorations, and any balance on the existing mortgage. Upon payment of all costs, the proceeds left from the sale shall be divided between the parties as follow:

1. The wife to receive _____ %.

2. The husband to receive _____ %.